

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

XOUO

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements.

The time limit for correction of each violation is specified in the narrative portion of this report.

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Establishm		-: 1	Telephone Number	Date of Ins (mm/dd/yr	rate of Inspection PERMIT #	
Cru	ville E	(number and street, city, state, zip code)	हार ज्यर ऽडल	I .	•	19-126
				1/47	1/29/20 19-126	
	Cross 5	7. Grunville, 12 47124		- I	I D 1	
Owner	Z) 1.		Purpose:	Follow-up Release Date		
NAFC Schals Owner's Address			Routine	~ /0 d ~ \		
Ownersa	.uuress		2. Follow-up	Summary	of Violation	ns:
Person in (Charge		3. Complaint	$C \times NC \times R \times R$		
		les	4. Pre-Operational			
Responsibl	le Person's E	mail	5. Temporary	Menu Type (See back of page)		
			6. HACCP			
Certified F	Food Manager	ly (6/14/22)	7. Other (list)	7. Other (list) 1 2 3 × 4		
		IDENTIFIED IN THE CHECKLIST AND NARRATIVE C	COLUMNS MARKED "C"			
• VIOLATIO	ON(S) REPEA			AND IN THE N	VARRATIVE	RELOW AS "R"
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" Section# C/NC R Narrative				To Be Corrected By		
217	NC					
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430	NC	Observed (2) missing earling teles	i in thing room	/ weck		
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Danaissa d h	y (name and t	ista anime di	Inspected by (name and title	- mainted).		
	• `	* '	4 "	Ingrow	· (EHS)
Received b	y (signature);	L. Keithley J. Keithlen	Inspected by (signature):		•	
C.	Letu!	2	1			
ee;		cc:		cc:		